SDNY PRO SE OFFICE

2022 OCT 12 AMI9: 10 UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

KobenTW. NORTH

Write the full name of each plaintiff.

22 cv 10964 (MG)

(Include case number if one has been assigned)

-against-

Celsius NeTWORK LLC Heboken, n.J. **COMPLAINT** 

Do you want a jury trial?
□ Yes ∫ □ No

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

## **NOTICE**

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

## I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

be a citizen of the same State as any plaintiff.
What is the basis for federal-court jurisdiction in your case?
Federal Question
☐ Diversity of Citizenship
A. If you checked Federal Question
Which of your federal constitutional or federal statutory rights have been violated?
acct with Celsius all Transactions
have been faused, unable to axis
my acct Trade luy, sell, Transfel
meed to withdraw may funds -
B. If you checked Diversity of Citizenship Cect, Paused
1. Citizenship of the parties
Of what State is each party a citizen?
The plaintiff, Pobent W Nove 5, is a citizen of the State of (Plaintiff's name)
MA,
(State in which the person resides and intends to remain.)
or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of
If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual: 4/10	
The defendant,	, is a citizen of the State of
(Defendant's name)	
·	
or, if not lawfully admitted for permanent resid subject of the foreign state of	lence in the United States, a citizen or
	·
If the defendant is a corporation:	
The defendant, (c/S/UC Ne.TW)	プペイ , is incorporated under the laws of
the State of W. T. & W.	ited Kingdom, HoboKen, N.
and has its principal place of business in the Sta	ate of NJ-
or is incorporated under the laws of (foreign state	te) United Kingdom
and has its principal place of business in	SA,
If more than one defendant is named in the compla information for each additional defendant.	int, attach additional pages providing
II. PARTIES	
A. Plaintiff Information	
Provide the following information for each plaintif	f named in the complaint. Attach additional
pages if needed.	
Robert W	NORTH
First Name Middle Initial	Last Name
157 le negnine - white	e Du
Street Address	
MARSHFIELD MA County, City State 81 9620442 ru	2050 Zip Code  whod a Live, com
County, City State	e Zip Code

Email Address (if available)

Telephone Number

## B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:	Celsius	Cordo.				
	First Name	Last Name				
	Current Job Title (or	other identifying information)				
	Current Work Address (or other address where defendant may be served)					
	County, City	State	Zip Code			
Defendant 2:						
	First Name	Last Name				
	Current Job Title (or	other identifying information)	<del></del>			
	Current Work Address (or other address where defendant may be served)					
	County, City	State	Zip Code			
Defendant 3:						
	First Name	Last Name				
	Current Job Title (or other identifying information)					
	Current Work Address (or other address where defendant may be served)					
	County, City	State	Zip Code			

	First Name	Last Name	
	Current Job Title (or	other identifying information)	
	Current Work Addres	s (or other address where defe	endant may be serve
	County, City	State	Zip Code
III. STATEMI Place(s) of occur	ENT OF CLAIM	us Networ	2K
Date(s) of occur	rence: 3021	-2022	
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additional page	s if needed.	sonally did or failed to do tha	is on h
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IV. RELIEF State briefly what m	oney damages or oth	er relief you wan	Menta	order.
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The Me	oney damages or oth	er relief you wan	Menta	order.

## V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

10-6-22		Kolert W Worth	
Dated		Plaintiff's Signature	
Robent	w	NORTH	
First Name	Middle Initial	Last Name	
157 Pereg	rine White	- Dr	
Street Address			
Marshfiel	d MH	4 02050	
County, City	Stat	te Zip Code	
781 963 04	42 /	runoda line.	con
Tolophone Number	1 1	Fmail Address (if available)	

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically: ☐ Yes ☐ ŴNo

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.



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Southern District of M.Y.
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Mew York, M. Y. 10007

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S.D.N.Y.



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SDINY PRO SE OFFICE

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